UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

RLH Assets, LLC d/b/a Foodwit,		Case No.	Case No.: 3:25-CV-00656			
		Plaintiff(s),				
v.			MOTION FOR LEAVE TO PRO HAC VICE			
ESHA Research	n, LLC,					
		Defendant(s).				
Attorne	ey Matthe	ew S. Warren	req	uests special adn	nission <i>p</i>	oro hac
vice to the Bar	of the U	nited States District C	Court for the Distr	ict of Oregon in	the abov	/e-
captioned case	for the p	ourposes of representi	ng the following	party (or parties)):	
Plaintiff RLH As	sets, LLC	d/b/a Foodwit				
In supp	ort of thi	s application, I certify	y that: 1) I am an	active member	in good s	standing
		_ State Bar; and 2) th	•		C	· ·
		Federal Rules of Civi				
		Statement of Professi				01 11115
,		t my admission to the		d States District	Court fo	or the
		lely for the purpose o				
	_			above matter and	u wiii be	,
terminated upo	on the cor	nclusion of the matter	r.			
(1)	PERSO	ONAL DATA:				
	Name:	Warren, Matthew S.				
		(Last Name)	(First Name)	,	(MI)	(Suffix)
		y/firm affiliation: Wa		LLP		
	Mailing	g address: 2261 Mark	cet Street, No. 606			
	City: S	an Francisco		State: CA	Zip:	94114

Phone number: (415) 895-2940 Fax number: (415) 895-2964

U.S. District Court – Oregon Motion for Leave to [Rev. 11/2019]

Business e-mail address: matt@warrenkashwarren.com

(2)	BAR	ADN	MISSIC	II NC	NFO	RM	ATION:
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- (a) State bar admission(s), date(s) of admission, and bar number(s):

 The Bar of Commonwealth of Massachusetts, 12/1998, #641250; State Bar of

 New York, 12/2001, #4016275; State Bar of California, 05/2004, #230565.
- Other federal court admission(s) and date(s) of admission:

 S.D.N.Y., 07/2003; S.D.N.Y., 07/2003; C.D. Cal., 6/2004; E.D. Cal., 06/2004; S.D. Cal., 06/2004;

 N.D. Cal., 07/2004; 11th Cir., 05/2005; E.D. Tex., 07/2014; Fed. Cir., 08/2014; 9th Cir., 04/2019;

 W.D. Tex., 12/2020; Supreme Court of U.S., 01/2023.

(3) CERTIFICATION OF DISCIPLINARY ACTIONS:

V	I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions.

I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)

(4) CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE:

Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.

(5) CM/ECF REGISTRATION:

I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.

Certification of Attorney Seeking *Pro Hac Vice* **Admission:** I have read and understand the requirements of LR 83-3, and I certify that the above information is true and correct.

	(Signature)	
	/s/ Matthew S. Warren	
DATED: 04/24/2025		

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REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for pro hac vice admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1.

To request a waiver of the following box:	e requirement to a	associate with loca	al counsel un	der LR 45-1,	check the		
I seek admission f Court did not issue requirement to ass from local counse	e. Pursuant to LF ociate with local	R 45-1(b), I request counsel and there	st a waiver of	the LR 83-3	8(a)(1)		
To associate with local coobtain the signature of loc	-	e following inform	nation about	local counse	l, and		
Name: McStay, P. Andrev	v Jr.						
	st Name)	(First Name)		(MI)	(Suffix)		
OSB number: <u>033997</u>							
Agency/firm affiliation: Davis Wright Tremaine LLP							
Mailing address: 560 SW 10th Avenue, Suite 700							
City: Portland		State: OR	Zip:		97205		
Phone number: (503) 241-2	2300	Fax number: (503) 778-5299	9			
Business e-mail address: andymcstay@dwt.com							
CERTIFICATION OF A	ASSOCIATE LO	OCAL COUNSE	L:				
I certify that I am a member and the requirement of the sequirement and the requirement are as a sequire of the sequirement and the sequire of the sequire o	nts of LR 83-3, a	•					
DATED: 04/24/2025		<u>_</u> :					
		s/ P. Andrew McS	Stav Ir				
		(Signature of Loc					
		(

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